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|--|--|---|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b>                        |  | Attorney Docket No. <b>D-2340</b>                     |
|  |  | First Inventor or Application Identifier <b>Ollis</b> |
| Title <b>Provisioning of Locally-Generated Prompts from a Central Source</b> |  |   |
| Express Mail Label No. <b>EF130453055 US</b>                                 |  |   |

|   |   |
|---|---|
| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents. | <b>ADDRESS TO:</b> Assistant Commissioner for Patents<br>Box Patent Application<br>Washington, DC 20231 |
|---|---|

|  |  |
|--|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br/>(Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification (Total Pages <b>10</b>)<br/>(Preferred arrangement set forth below)</p> <ul style="list-style-type: none"> <li>Descriptive title of the invention</li> <li>Cross References to Related Applications</li> <li>Statement Regarding Fed sponsored R &amp; D</li> <li>Reference to Microfiche Appendix</li> <li>Background of the invention</li> <li>Brief Summary of the invention</li> <li>Brief Description of the Drawings (if filed)</li> <li>Detailed Description</li> <li>Claim(s)</li> <li>Abstract of the Disclosure</li> </ul> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) (Total Sheets <b>4</b>)</p> <p>4. Oath or Declaration (Total Pages <b>1</b>)</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))<br/>(For continuation/divisional with Box 16 completed)</p> <p>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</p> | <p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> |
|--|--|

| ACCOMPANYING APPLICATION PARTS  |   |
|---|---|
| 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))                            |   |
| 8. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee)                            | <input checked="" type="checkbox"/> Power of Attorney                   |
| 9. <input type="checkbox"/> English Translation Document (if applicable)  |   |
| 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449                                    | <input type="checkbox"/> Copies of IDS Citations                        |
| 11. <input type="checkbox"/> Preliminary Amendment  |   |
| 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized) |   |
| 13. <input type="checkbox"/> Small Entity Statement(s)  | <input type="checkbox"/> Statement filed in prior application           |
|   | <input type="checkbox"/> Status still proper and desired (PTO/SB/09-12) |
| 14. <input type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)         |   |
| 15. <input checked="" type="checkbox"/> Other: <b>Express Mail Certificate of Mailing</b>                       |   |

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label \_\_\_\_\_ or ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

|         |                                 |           |                     |          |                     |
|---------|---------------------------------|-----------|---------------------|----------|---------------------|
| Name    | <b>Wendy W. Koba, Esq.</b>      |           |                     |          |                     |
| Address | <b>PO Box 556</b>               |           |                     |          |                     |
| City    | <b>Springtown</b>               | State     | <b>PA</b>           | Zip Code | <b>18081</b>        |
| Country | <b>United States of America</b> | Telephone | <b>610-346-7112</b> | Fax      | <b>610-346-8189</b> |

|                   |                            |                                   |                |
|-------------------|----------------------------|-----------------------------------|----------------|
| Name (Print/Type) | <b>Wendy W. Koba, Esq.</b> | Registration No. (Attorney/Agent) | <b>30509</b>   |
| Signature         | <b>Wendy W. Koba</b>       | Date                              | <b>9/14/00</b> |

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# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)**730.00**

## Complete if Known

Application Number  
Filing Date  
First Named Inventor **Ollis**  
Examiner Name  
Group / Art Unit  
Attorney Docket No. **D-2340**

## METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

☐ Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2. ☒ Payment Enclosed:  
☒ Check ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

| Large Entity Code | Small Entity Code | Fee (\$) | Fee (\$) | Fee Description        | Fee Paid      |
|-------------------|-------------------|----------|----------|------------------------|---------------|
| 101               | 690               | 201      | 345      | Utility filing fee     | <b>690.00</b> |
| 106               | 310               | 206      | 155      | Design filing fee      |               |
| 107               | 480               | 207      | 240      | Plant filing fee       |               |
| 108               | 690               | 208      | 345      | Reissue filing fee     |               |
| 114               | 150               | 214      | 75       | Provisional filing fee |               |

SUBTOTAL (1) (\$)**690.00**

### 2. EXTRA CLAIM FEES

| Total Claims       | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 12                 | -20** = 0    | 0              | 0        |
| Independent Claims | 2 - 3** = 0  | 0              | 0        |
| Multiple Dependent |              |                |          |

\*\*or number previously paid, if greater; For Reissues, see below

| Large Entity Code | Small Entity Code | Fee (\$) | Fee (\$) | Fee Description  | Fee Paid |
|-------------------|-------------------|----------|----------|--|----------|
| 103               | 18                | 203      | 9        | Claims in excess of 20                                     |          |
| 102               | 78                | 202      | 39       | Independent claims in excess of 3                          |          |
| 104               | 260               | 204      | 130      | Multiple dependent claim, if not paid                      |          |
| 109               | 78                | 209      | 39       | ** Reissue independent claims over original patent         |          |
| 110               | 18                | 210      | 9        | ** Reissue claims in excess of 20 and over original patent |          |

SUBTOTAL (2) (\$)**0**

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

| Large Entity Code | Small Entity Code | Fee (\$) | Fee (\$) | Fee Description  | Fee Paid     |
|-------------------|-------------------|----------|----------|--|--------------|
| 105               | 130               | 205      | 65       | Surcharge - late filing fee or oath  |              |
| 127               | 50                | 227      | 25       | Surcharge - late provisional filing fee or cover sheet                     |              |
| 139               | 130               | 139      | 130      | Non-English specification  |              |
| 147               | 2,520             | 147      | 2,520    | For filing a request for reexamination                                     |              |
| 112               | 920*              | 112      | 920*     | Requesting publication of SIR prior to Examiner action                     |              |
| 113               | 1,840*            | 113      | 1,840*   | Requesting publication of SIR after Examiner action                        |              |
| 115               | 110               | 215      | 55       | Extension for reply within first month                                     |              |
| 116               | 380               | 216      | 190      | Extension for reply within second month                                    |              |
| 117               | 870               | 217      | 435      | Extension for reply within third month                                     |              |
| 118               | 1,360             | 218      | 680      | Extension for reply within fourth month                                    |              |
| 128               | 1,850             | 228      | 925      | Extension for reply within fifth month                                     |              |
| 119               | 300               | 219      | 150      | Notice of Appeal   |              |
| 120               | 300               | 220      | 150      | Filing a brief in support of an appeal                                     |              |
| 121               | 260               | 221      | 130      | Request for oral hearing   |              |
| 138               | 1,510             | 138      | 1,510    | Petition to institute a public use proceeding                              |              |
| 140               | 110               | 240      | 55       | Petition to revive - unavoidable   |              |
| 141               | 1,210             | 241      | 605      | Petition to revive - unintentional   |              |
| 142               | 1,210             | 242      | 605      | Utility issue fee (or reissue)   |              |
| 143               | 430               | 243      | 215      | Design Issue fee   |              |
| 144               | 580               | 244      | 290      | Plant issue fee  |              |
| 122               | 130               | 122      | 130      | Petitions to the Commissioner  |              |
| 123               | 50                | 123      | 50       | Petitions related to provisional applications                              |              |
| 126               | 240               | 126      | 240      | Submission of Information Disclosure Stmt                                  |              |
| 581               | 40                | 581      | 40       | Recording each patent assignment per property (times number of properties) | <b>40.00</b> |
| 146               | 690               | 246      | 345      | Filing a submission after final rejection (37 CFR § 1.129(a))              |              |
| 149               | 690               | 249      | 345      | For each additional invention to be examined (37 CFR § 1.129(b))           |              |

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**40.00**

## SUBMITTED BY

| Name (Print/Type)    | Registration No. (Attorney/Agent) | Telephone           |
|----------------------|-----------------------------------|---------------------|
| <b>Wendy W. Koba</b> | <b>30509</b>                      | <b>610-346-7112</b> |
| Signature            | Date                              |                     |

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EXPRESS MAIL  
CERTIFICATE OF MAILING

Patent Application for:

Applicants: Jeffrey D. Ollis

Atty No: D 2340

Title: Provisioning of Locally-Generated Prompts  
from a Central Source

I hereby certify that this correspondence is being deposited with the United States  
Postal Service with sufficient postage as EXPRESS MAIL in an envelope addressed  
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On 9/14/00

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Type or Print name of person signing this certificate: Wendy W. Koba, Esq.

Signature: Wendy W. Koba

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